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## State of South Dakota

## Candidate's or Committee's Report of Receipts and Expenditures TATE

Candidates and candidate committees: File in the office where you filed your nominating petition. PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave, Pierre, SD 57501-5070 See pages 9 & 10 of the Guideline Book for specific instructions on completing this report. Name of Candidate or Committee SD Health Care Assoc. Political Action Comm. Complete Mailing Address 804 N Western Ave Sioux Falls, SD 57104-2071 Davtime Phone (605) 339-2071 Name of Person Making Report Mark B. Deak If you are a candidate, what office are you seeking If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed. Type of Report (See pages 4 & 5 of Guideline Book) Year-End Report For Reporting Period Ending (See pages 4 & 5 of Guideline Book) Dec. 31, 2002 The following verification must be completed before submitting report. VERTFICATION OF PERSON MAKING REPORT (print name legibly), certify I Mark B. Deak that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. Date: Jan. 20, 2003 Candidate Signature or Signature of Committee Treasurer or Chairperson

Revised July 2001

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SECRETARY OF STATE

Name of Candidate or C	Committee <u>SD Health C</u>	are Assoc. Political	Action Comm.	
For the reporting peri	iod ending Dec. 31, 2	002		
	Schedule A - Direct Contributions			
This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.				
Unitemized Contribution			*\$ <u>228.92</u>	
Itemized Contributions Name	Residence Address	Place of Employment (Name of Employer)		
Neal Asper	Rosholt		\$ 101.00	
11002	NOBINIE		\$	
			\$	
	31		\$	
			\$	
			\$	
			\$	
			\$	
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			\$	
A A A A A A A A A A A A A A A A A A A			\$	
			\$	
			\$	
			\$	
			\$	
Total of Itemized Con	tributions from Indiv	iduals:	*\$ <u>101.00</u>	

0-11 1- A - D!-	Dec. 31, 2002	
Schedule A - Dir	rect Contributions (continued)	
nitemized Contributions from Po	olitical Parties:	*\$ <u>0</u>
temized Contributions from Poli	itical Parties	
Party Name	Address	
		\$ <u>0</u>
		\$
otal of Itemized Contributions	from Political Parties:	*\$
(All contributions from I PAC Name	itical Action Committees (PAC' PAC's must be itemized.) Address	4
		. \$
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Name of Candidate or Committee SD H	ealth Care Assoc.	Political Action Comm.		
For the reporting period ending Dec	. 31, 2002			
Schedule B - Fund-F	Raising Events Proc	ceeds		
List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 or their contribution results in their aggregate being more than \$100 in the calendar year, those contributions must be itemized on Schedule A.				
Type of Event	Net Proceeds	. 13		
		J. V. View 18 July		
		Total: \$ 0		
<b>立次全国基础基础的基础证券</b>				
Schedule C - In	Kind Contribution	s		
Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported.				
Nature of Non-Cash Contribution Estimated Value Name of Contributor				
	,			
	: 6	Total: \$ 0		
	=======================================			
Schedule D - Other Income				
Use this schedule to report any refunds, interest earn	ed or other income which	is not a direct contribution.		
Source of Income	Amount			
Interest .63				
INTELEBE • 600		40		
		We have an employed		
		Total: \$63		

Name of Candidate or	Committee SD Health Care Assoc.	Political Action Comm.	
For the reporting pe	eriod ending Dec. 31, 2002	· · ·	
Schedule F - Debts and Obligations			
This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.			
Owed To	Purpose	Amount	
		.40	

Name of Candidate or Comm	ittee <u>SD Health</u>	Care Assoc. Political	Action Comm.	
For the reporting period	ending Dec. 31,	2002		
	Schedule E - Ex	penditures		
This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.				
Item Amount	Contribution	s Made to Candidates a	nd Committees:	
Advertising 0				
Consulting 0				
Postage 0				
Printing 0	. (3.)	grand and ending		
Rent 0				
Salaries 0				
Telephone 0				
Travel 0				
Utilities 0				
Other Expenses:				
Bank Service Charges	-5.7			
	•			
· ·				
			# <b>4</b>	
		Total Expenditures:	\$ <u>-5.75</u>	

Name	of Candidate or Committee SD Heal	th Care	Assoc.	Political	Action
For	the reporting period ending Dec. 31.	2002			
	Summar	y Page			
This Pleas	summary sheet will give a brief outline of all campa e transfer all totals from the schedules previously co	ign finance a impleted.	ctivity during	g this reporting	ng period.
1.	Amount on hand, if any, at beginning	g of repo	rting per	riod \$26	4.02
2.	Receipts		,		
	Schedule A - Direct Contributions	<b>\$</b> 329.92			
	Schedule B - Fund-Raising Events	\$ <u>0</u>			
	Schedule C - In Kind Contributions	\$0			
	Schedule D - Other Income	\$ .63			
	Total of all receipts	<b>\$</b> 330.55			
з.	Total Monetary Receipts (A+B+D)			\$ <u>3</u>	30.55
4.	Candidate's Personal Contribution t	o Own Cam	paign	\$	0
5.	Monetary Loans to Candidate or Comm Reporting Period	ittee Dur	ing	\$	0
6.	Monetary Loans Repaid During Report	ing Perio	đ	\$	0
7.	Expenditures - Schedule E			\$	-5.75
8.	Unpaid Obligations - Schedule F	<b>\$</b> 0			
9.	Amount on hand at the close of this This should equal lines (1+3+4+5)-(		g period	\$ <u>5</u>	88.82